

UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

Andy Ortiz

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No.

21-CV-3101

(to be filled in by the Clerk's Office)

CIO: S. Blackshear, CP: A. Jones, Sgt. V. White, LT. G. Malloy, CIO: C. Carmona, CIO: Robinson, LT. Cheek, LT. Linn, CIO: C.L. Jones, CIO: N. Muhammad, Deputy Warden's ECruz and R. Rose, Blanche Carney, a PDP Commissioner, Defendant(s) C.F.C.F.

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

The Clerk will not file a civil complaint unless the person seeking relief pays the entire filing fee (currently \$350) and an administrative fee (currently \$52) in advance, or the person applies for and is granted in forma pauperis status pursuant to 28 U.S.C. § 1915. A prisoner who seeks to proceed in forma pauperis must submit to the Clerk (1) a completed affidavit of poverty and (2) a copy of the trust fund account statement for the prisoner for the six month period immediately preceding the filing of the complaint, obtained from and certified as correct by the appropriate official of each prison at which the prisoner is or was confined for the preceding six months. See 28 U.S.C. § 1915(a)(2).

If the Judge enters an order granting a prisoner's application to proceed in forma pauperis, then the order will assess the filing fee (currently \$350) against the prisoner and collect the fee by directing the agency having custody of the prisoner to deduct an initial partial filing fee equal to 20% of the greater of the average monthly deposits to the prison account or the average monthly balance in the prison account for the six-month period immediately preceding the filing of the complaint, as well as monthly installment payments equal to 20% of the preceding month's income credited to the account for each month that the balance of the account exceeds \$10.00, until the entire filing fee has been paid. See 28 U.S.C. § 1915(b). **A prisoner who is granted leave to proceed in forma pauperis is obligated to pay the entire filing fee regardless of the outcome of the proceeding, and is not entitled to the return of any payments made toward the fee.**

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name Andy Ortiz
 All other names by which you have been known: wyosnoop, Snoop, lilu, Andrew
 ID Number 1212917
 Current Institution Curran - Fromhold - Correctional - Facility
 Address 7901 State Road
Philadelphia PA 19136
City State Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name C/O: S. Blacksheer
 Job or Title (*if known*) correctional officer
 Shield Number Badge # unknown
 Employer Curran - Fromhold - Correctional - Facility
 Address 7901 State Road
Philadelphia PA 19136
City State Zip Code
☒ Individual capacity ☐ Official capacity

Defendant No. 2

Name C/O: A. Jones
 Job or Title (*if known*) Correctional Officer
 Shield Number Badge # unknown
 Employer Curran - Fromhold - Correctional - Facility
 Address 7901 State Road
Philadelphia PA 19136
City State Zip Code
☒ Individual capacity ☐ Official capacity

DEFENDANT NO: 5

NAME: SGT. V. WHITE

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAW-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: SUPERVISOR

DEFENDANT NO: 6

NAME: CO: ROBBINSON

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAW-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: CORRECTIONAL OFFICER

DEFENDANT NO: 7

NAME: LT. CHEEK

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAW-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: SUPERVISOR

DEFENDANT NO: 8

NAME: CO: CL. JONES

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAW-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: CORRECTIONAL OFFICER

DEFENDANT NO: 9

NAME: LT. LINN

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAN-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: SUPER VISOR

DEFENDANT NO: 10

NAME: CO: N. MUHAMMID

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAN-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: CORRECTIONAL OFFICER

DEFENDANT NO: 11

NAME: DEPUTY WARDEN: E. CRUZ

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAN-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: SUPER VISOR

DEFENDANT NO: 12

NAME: DEPUTY WARDEN: R. ROSE

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAN-FROMHOLD-CORRECTIONAL-FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: SUPER VISOR

TURN OVER

DEFENDANT NO: 13

NAME: COMMISSIONER: BLANCHE CARNEY

SHIELD NUMBER: BADGE # UNKNOWN

EMPLOYER: CURRAN - FROMHOLD CORRECTIONAL FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: COMMISSIONER OF PRISON

DEFENDANT NO: 14

NAME: PHILADELPHIA DEPT. OF PRISON

SHIELD NUMBER: NOT APPLY

EMPLOYER: CURRAN - FROMHOLD - CORRECTIONAL - FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: THE PRISON ITSELF

DEFENDANT NO: 15

NAME: CURRAN - FROMHOLD - CORRECTIONAL - FACILITY

SHIELD NUMBER: NOT APPLY

EMPLOYER: CITY OF PHILADELPHIA

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: PRISON

DEFENDANT NO: 16

NAME: CITY OF PHILADELPHIA

SHIELD #: NOT APPLY

EMPLOYER: CITY OF PHILADELPHIA

ADDRESS: UNKNOWN

JOB TITLE: CITY OF PHILADELPHIA

TURN OVER

DEFENDANT NO: 17

NAME: C/O: S. GRANT

SHEILD #: BADGE # UNKNOWN

Employer: CURRAN - PROM HOLD - CORRECTIONAL - FACILITY

ADDRESS: 7901 STATE ROAD

PHILADELPHIA, PA. 19136

JOB TITLE: CORRECTIONAL OFFICER

Defendant No. 3

Name C/O: C. Carmona
 Job or Title (if known) Correctional Officer
 Shield Number Badge # unknown
 Employer Curran - Fromhold-Correctional-Facility
 Address 7901 State Road
Philadelphia PA 19136
City State Zip Code
☒ Individual capacity ☐ Official capacity

Defendant No. 4

Name L.T.G. Malloy
 Job or Title (if known) Supervisor
 Shield Number Badge # unknown
 Employer Philadelphia Dept. of Prison
 Address 7901 State Road
Philadelphia PA 19136
City State Zip Code
☒ Individual capacity ☐ Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

- ☐ Federal officials (a *Bivens* claim)
☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

MY DUE PROCESS CLAUSE, RESTRICTIVE OR INHUMANE CONDITIONS OF CONFINEMENT. SEE: *FARMER V. BRENNAN*. WHEN PRISON OFFICIAL IGNORE SERIOUS DANGER. EXCESSIVE FORCE BY GUARD AND INMATE - FAILURE TO PROTECT 8th Amendment CLAIM. FEDERAL RIGHTS, BILL OF RIGHTS CONSTITUTIONAL RIGHTS. DEALING WITH VIOLENT ABUSE AND RETALIATION. PROTECT CONDUCT

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

DEFENDANT NO: 1

C/O: S. BLACKSHEER

HAD ~~THE~~ OPEN MY CELL DOOR TO HAVE INMATES TO ASSAULT ME. I RAN OUT THE CELL WITH MY SHIRT OFF. CAUSE, I FELT UNSAFE

DEFENDANT NO: 2

C/O: A. JONES WATCH DEFENDANT NO: 1

C/O: S. BLACKSHEER UNLOCK THE DOOR TO HAVE TWO INMATES TO ATTACK ME. AND DIDN'T TRY TO STOP HIM.

INCIDENT HAPPEN ON THE ~~PRO~~ PROTECTIVE CUSTODY BLOCK ON NOV-6-2020 OR OCT-6-2020 WAS REPORTED TO THE P-I-L-P.

BOTH OFFICERS VIOLATED MY FEDERAL RIGHTS FAILURE TO PROTECT ME. DUE PROCESS CLAIM NOTHING WAS WRITTEN UP. 8th Amendment RIGHT EXCESSIVE FORCE BY GUARD'S. AND CONSTITUTIONAL RIGHTS. PROTECT CONDUCT 1st AMENDMENT RIGHT.

DEFENDANT NO: 2 C/O: A. JONES TOLD AN INDIVIDUAL INMATE TO ASSAULT ME THE NEXT DAY WHEN SHE GETS OFF WORK. ALSO VIOLATED 8th Amendment RIGHT ~~TO~~ TO BE FREE FROM EXCESSIVE FORCE ALSO FAILURE TO PROTECT CLAIM. INMATE ASSAULT ME THE NEXT DAY IN THE YARD.

I INFORMED DEFENDANT NO: 5 Sgt. V. WHITE ON (FILE) THAT I AIN'T FEEL SAFE

AROUND THESE TWO OFFICERS SEE WALKED AWAY ~~FROM~~ FROM THE CELL IGNORED ME.

DEFENDANT NO: 5 Sgt. V. WHITE VIOLATED MY FEDERAL RIGHTS TO FAILURE TO PROTECT CAUSE, I STATED TO HER I WANTED TO BE ON HOUSED ALONE STATUS 1st Amendment RIGHT TO PROTECT CONDUCT.

I SPOKE WITH DEFENDANT NO: 4 LT. G. Malloy ABOUT GUARD ASSAULT ME. SHE TOLD ME THE BEST SHE CAN DO IS REPLY TO MY GRIEVANCE AND TO HAVE ME ~~REWRITE~~ WRITE A MEMO.

I FILED A MEMO. I WROTE AND TOLD LT. G. Malloy THAT I WAS STILL BEING RETALIATED AND DEALING WITH VIOLENTS AND ABUSE SHE IGNORE ME AND TOLD ME SHE DID THE BEST SHE CAN DO HELP ME TO TAKE IT UP WITH SOMEONE ELSE.

SO I CONTACT DEFENDANT NO: 11, 12, 13 WHICH ARE DEPUTY WARDEN, E. CRUZ, DEPUTY WARDEN: R. ROSE, Blanche CARNEY COMMISSIONER OF PRISON HAVE NOT GET NO REPLY TO MY APPL'S. THEY ARE THE SUPERVISOR TO THESE GUARD THAT ASSAULT ME. THEY ARE UNDER THERE SUPERVISION BUT ALSO FAILURE TO PROTECT CAUSE I ACKNOWLEDGE THEM IN A GRIEVANCE AND LETTERS THAT I WAS NOT SAFE AND I WAS IGNORED MOST OF THE TIME AND WAS GETTING ASSAULT BY GUARD AND INMATES. 1st Amendment PROTECT CONDUCT

AROUND MAY 1, 2021 I WAS ASSAULT
 BY ~~AN~~ AN INMATE IN THE BUBBLE
 DEFENDANT NO: 3 C/O: C. CARMONA INFORM
 AN INMATE TO ~~GO TO THE~~ TELL ME TO
 GO TO THE BUBBLE. THE C/O: C. CARMONA
 INSTRUCT THE INMATE TO SLAP ME.
 HE VIOLATED TO FAILURE TO PROTECT AND
 DUE PROCESS CAUSE FAILED TO WRITE THAT
 INDIVIDUAL INMATE UP. I WENT DOWN MEDICAL
 CAUSE I WAS REFUSED MEDICAL THE DAY IT
 HAPPEN. I SPOKEN WITH LT. REED AND
 DISCUSS TO HER WHAT HAPPEN. ALSO LT. CHEEK
 DEFENDANT NO: 7 LT. CHEEK WAS ALSO NOTED
 TOLD ME I WILL ~~BE~~ BE REMOVED OFF THE BLOCK
 I GOT BACK TO THE BLOCK WAS THEN
 ASSAULTED BY MY CELLY WHILE IN THE PROCESS
 OF MOVING OFF THE BLOCK. LT. CHEEK REFUSE
 FOR ME TO GO TO MEDICAL. I INFORMED TO
 HER THAT INMATES WERE OUT SIDE MY DOOR
 PASSING A WEAPON UNDER THE DOOR FOR
 MY CELLY TO USED AGAINST ME.
 FAILURE TO PROTECT. I WAS ASSAULTED
 BY DEFENDANT NO: 10 C/O: N. MUHAMMAD
 IN THE CELL WAS ~~BE~~ PUNCHED AND SLAPED
 IN THE FACE. HE CLOSED THE DOOR
 BEHIND HIM WHEN THE INCIDENT ACCORD.
 I FILED A MEMO AND GRIEVANCE. VIOLATED
 FAILURE TO PROTECT AND EXCESSIVE FORCE.

DEFENDANT NO: 8 & 9 & 17

LT. LINN AND C/O: CL. JONES AND C/O S. GRANT
WAS ON MY DOOR 12-2-21 INFORMED ME
TO NOT BRANG ON MY DOOR. CAUSE, I NEEDED
MEDICAL ATTENTION CAUSE OF MY ~~HEALTH~~
BREATHING WAS ACTING UP.

LT. LINN THREATEN ME SHE WILL HAVE
ME GET PEPPER SPRAYED WITH A BIG CAN
~~OF~~ OF PEPPER SPRAY AND HAVE A COUPLE OF
MALE GUARDS TO ASSAULT ME.

C/O CL. JONE AND C/O S. GRANT DID NOT
TRY TO STOP HER TO RESOLVE THE INCIDENT.

DEFENDANT NO: 14, 16, 17

CITY OF PHILADELPHIA

PHILADELPHIA DEPT. OF PRISON

CURRAN - FROM HOLD-CORRECTIONAL-FACILITY
ARE RECOND SIBLE OF KEEP ME SAFE
AND I AM UNDER THERE CUSTODY.

FAILURE TO KEEP ME SAFE.

VIOLATED ALL RIGHT FEDERAL AND BILL
OF RIGHTS.

DEFENDANT NO. 6 FAILED TO PROTECT
I WAS ON PROTECTIVE CUSTODY WAS
ASSAULTED BY TWO INMATES.

OFFICER WAS NOT ON THE BLOCK
AT THE TIME.

Respectfully Submitted


- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

(SEE APPENDUM) / ADDITIONAL PAGES

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (check all that apply):

- ☒ Pretrial detainee
- ☒ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (explain) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

YES, IN

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

YES, IN DIFFERENT LOCATION, INSIDE THE PRISON. SEE ADDITIONAL PAGES. (SEE APPENDUM)

C. What date and approximate time did the events giving rise to your claim(s) occur?

(SEE APPENDUM)

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

(SEE APPENDUM)

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

SWELLING FACE, LUMPS AND NOSE BLEED WAS FORCED TO HEAL IN THE CELL. P.T.S.D DEALING WITH PAIN AND SUFFERING FROM MENTAL HEALTH ILLNESS. TALKING SLOWER AND RESPOND TO QUESTION TAKE ME A WHILE TO RESPOND. GETTING HIT ALOT IN THE HEAD CAUSE ME TO TALK AND THINK SLOWER AND TO REACT TO THINGS.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

5 Million U.S. Dollars All together with ^{ALL} My civil suit Cases. Include punitive damages. Due To Failure to report, incident and Failure to protect. All go to the Eastern District courts of PA.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Curran-Framhold - Correctional - Facility

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☐ Yes

☒ No

☐ Do not know

If yes, which claim(s)?

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☒ No

- E. If you did file a grievance:

1. Where did you file the grievance?

I Filed The grievance at The prison
Curran - Fromhold - Correctional - Facility.

2. What did you claim in your grievance?

ALL OF THE MATTERS I HAVE STATED THAT
OFFICER HAD DID TO ME IN THIS
CIVIL SUIT

3. What was the result, if any?

NO result was made at all.

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

The Jail does not reply to NONE OF MY
ISSUES I ALSO AINT NEVER GET THE CHANCES
TO APPEAL CAUSE THEY NEVER RESPOND.

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

NOT APPLY CAUSE I FILED ONE

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

I INFORM Correctional OFFICERS AND SUPERVISORS LISTED ABOVE.

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

I CONTACT BIANCHE CARNEY DUE TO ME BEING UNDER HER custody and SHE ~~RESPOND~~ RELIEFABLE TO KEEP ME PROTECTED. ALSO DEPUTY WARDEN R. ROSE AND E. CRUZ.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☐ Yes

☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

NOT APPLY

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☒ Yes

☐ No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) ANDY ORTIZ

Defendant(s) CITY OF PHILADELPHIA

2. Court (if federal court, name the district; if state court, name the county and State)

EASTERN DISTRICT COURTS OF PA

3. Docket or index number

21-CV-3100

4. Name of Judge assigned to your case

Judge: H/ GERALD J. PAPPERT

5. Approximate date of filing lawsuit

FEB-28-2021

6. Is the case still pending?

☒ Yes

☐ No

If no, give the approximate date of disposition.

NOT APPLY YET.

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

NOT APPLY YET.

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

E.D.Pa. AO Pro Se 14 (Rev. 01/21) Complaint for Violation of Civil Rights

☒ Yes☐ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s)

ANDY ORTIZ

Defendant(s)

P.I. CL

2. Court (if federal court, name the district; if state court, name the county and State)

EASTERN DISTRICT COURTS OF PA

3. Docket or index number

21-CV-3813

4. Name of Judge assigned to your case

Judge: /s/ GERALD J. PAPPERT

5. Approximate date of filing lawsuit

FEB-28-2021

6. Is the case still pending?

☒ Yes

☐ No

If no, give the approximate date of disposition

NOT APPLY YET.

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

NOT APPLY YET.

ANDY ORTIZ / C.E.L.F / D1-4
PHILADELPHIA DEPT. OF PRISON
7901 STATE ROAD
PHILADELPHIA, PA 19136

(LEFT)
(MAIL)



U.S.M.S.
X-RAY

EASTERN DISTRICT COURT OF PA
CLERK OF COURT, EDPA
JAMES A. BYRNE U.S. COURT HOUSE
ROOM 2609
601 MARKET STREET
PHILADELPHIA, PA 19106

